

*AMENDMENTS TO THE SPECIFICATION*

Replace the paragraph beginning at page 4, line 8 with:

The first chamber has a bottom which consists of a relatively thin flexible membrane which is fixed to the skin of the patient and comprises an opening allowing the passage of the base of the catheter and of ~~this~~ the catheter.

Replace the paragraph beginning at page 7, line 10 with:

The device which is represented in Figures 1-4 applies to the fixation to the body of a patient of a central venous catheter 1, which has been placed in a large vein 2 of the body of the patient by the subcutaneous route, where the external part 1a of catheter 1 exits from the skin P, and is attached to a support base ~~3~~ constituting a small closed and sealed reservoir 3, which is connected at its end opposite the catheter 1 to at least one catheter or external tube 4 which is in fluid communication with the catheter 1 for the administration of a medicinal product in reservoir 3. One to five external catheters 4 can be connected to reservoir 3 to administer several different medicinal products in the vein 2 through the reservoir 3 and the venous catheter 1. Naturally, each external catheter 4 is connected to known perfusion means.

Replace the paragraph beginning at page 10, line 23 with:

The above-described device thus prevents any accidental extraction of the reservoir 3 from the venous catheter 1 and it can be adapted perfectly to the anatomical area of the patient, which makes the patient more comfortable and allows him/her to get about more easily. The device avoids the use of any fixation by means of sutures from the support or of the base ~~3~~ in the form of a reservoir 3 to the skin.

Replace the paragraph beginning at page 10, line 28 with:

The second embodiment of the device of the invention, which is represented in Figure 5, differs from the device of the first embodiment only in the absence of the two pads 14 and the presence of a relatively thin flexible membrane 17 constituting the bottom of the chamber 8 and comprising an orifice 18, which allows the passage of the reservoir 3 with its wings 3b and of the external part 1a of the venous catheter 1 after the latter has been placed. The membrane 17 can comprise slits 19 which start from the edge of the orifice 18 to allow the passage of the reservoir 3 and of its wings through the orifice 18 by elastic deformation of the tongues defined between the different slits 19 extending radially in the case of a circular orifice 18. In addition, the internal face of the membrane ~~19~~ 17, which is located in the same plane as the internal face of the base 7 and which can be prepared by molding to the latter, and the housing 5 can be coated with a colloid which makes it possible to apply the membrane 17 to the skin of the patient, and the colloid can comprise antiseptic or antimicrobial substances.

Replace the paragraph beginning at page 11, line 9 with:

According to the third embodiment of Figures 6 and 7, the housing 5 is flat, as in the preceding embodiments, and in a top view it is in the shape of a semicircle which is extended by two parallel sides which are connected by a transverse side which defines the back wall of the housing 5 opposite the bent front wall, and the second chamber 9, which opens directly into the chamber 8, is defined by a slender hollow part with a semicircular transverse cross section, formed in the upper wall 5a of the housing 5 by extending perpendicularly to the right lateral wall of the chamber 8, of semicircular shape when seen from above. The hollow part 9 can taper from the end which opens into the chamber 8 to receive the sleeve-shaped catheter base 31 of the catheter 1, in the present case of the peripheral or arterial venous type with single channel, that is a single external catheter is connected to the ~~sleeve 3~~ catheter base 31. The latter can have a general truncated tapered shape paired to the reception chamber

9. The two pads 13 of the internal face of the lid 6 define, between themselves, a space whose shape matches the upper part of the catheter sleeve 9 to maintain the ~~sleeve-3~~ sleeve-shaped catheter base 31 in the housing 5 with lid 6 closed. The recess which defines the chamber 9 is delimited at the upper part by two lateral flat faces 9a which are parallel to the upper face 5a of the housing 5 and connected to the latter by two flanges 9b extending obliquely by diverging opposite the chamber 8 in the case where the ~~sleeve-3~~ sleeve-shaped catheter base 31 is truncated. With lid 6 closed, the two pads 13 are simply applied with their end faces 13b and their external lateral faces 13c on the faces 9a and the flanges 9b, respectively.

Replace the paragraph beginning at page 12, line 12 with:

The reception chamber 9 of the sleeve 3 is provided through the corresponding lateral wall of the housing 5 in the upper part of the latter by opening into the chamber 8, at the upper part of the latter and partially at the upper face 5a of the housing 5. The chamber 9 presents a transverse cross section which is approximately in the shape of a U whose lateral walls taper from the chamber 8 to hold the matching truncated part of the ~~sleeve-3~~ of the catheter base 31, constituting the base of the Huber needle 1, which base forms a Luer female conical connection to which an external tube 4 can be connected.

Replace the paragraph beginning at page 12, line 19 with:

The truncated chamber 9 for accommodating the ~~base-3~~ sleeve-shaped catheter base 31 is delimited at the upper part of its lateral walls by two catches 9c, which are located on either side of a lateral wall, projecting from this wall and flush with the upper face 5a of the housing 5 towards the ~~base-3~~ sleeve-shaped catheter base 31, in such a manner that they are arranged above the latter base in its position where it is mounted in the housing 5 to retain the ~~base-3~~ sleeve-shaped catheter base 31 in the chamber 9. Each catch 9c of a lateral wall of the chamber 9 is located opposite catch 9c of the other lateral wall, thus defining a space between them which is transverse to

the chamber 9, and two catches of a lateral wall are spaced longitudinally at this chamber 9. In addition, the catches 9c are elastically deformable towards the bottom of the chamber 9 to allow the embedding of the ~~base 3~~ sleeve-shaped catheter base 31 in this chamber, as will be seen below. In the mounted position, the ~~base 3~~ sleeve-shaped catheter base 31 has its truncated end part of larger diameter projecting from the housing 5, to which the external tube is connected, for example, through the intermediary of a male conical connection which is an integral part of this tube and engages in the ~~base 3~~ sleeve-shaped catheter base 31. The ~~base 3~~ sleeve-shaped catheter base 31 is thus retained not only by the catches 9c, but also by clamping in the truncated chamber 9, and the part of the Huber needle 1 which is curved at a right angle, and which is introduced into the chamber which has been implanted under the skin, extends approximately along the longitudinal or vertical axis of the chamber 8 whose general shape is cylindrical. An internal groove is formed in the chamber 9 between two longitudinally spaced pairs of catches 9c, and opens at the upper face 5a of the housing 5 between two adjacent catches. The role of the groove 9d will be explained later with reference to Figures 12 and 13.

Replace the paragraph beginning at page 13, line 8 with:

As is more apparent in Figures 8 and 10, the housing 5, with its base 7, presents the general shape of a bell and it comprises, at the lower part of its wall into which the ~~base 3~~ sleeve-shaped catheter base 31 projects, a hollow part or notch 5b, which is located above the base in the form of a sheet 7, thus releasing to a large part the base 7 of this wall, conferring to it a flexibility which allows it to be molded to the anatomical area of the patient to which the housing 5 is to be fixed. Similarly, the internal part of the wall of the housing 5, which is opposite the wall from which the ~~base 3~~ sleeve-shaped catheter base 31 projects and located vertically with respect to the articulation hinge 20 of the lid 6 on the housing 5, comprises a hollow part or notch 5c which separates a large part of the base 7 from this wall to confer to it the flexibility required for the fixation of the housing 5 to the skin of the patient. The

remaining parts of the base 7 are integral parts of the other lateral walls of the housing 5, connecting to the two above-mentioned transverse walls.

Replace the paragraph beginning at page 13, line 20 with:

The lid 6 is latched to its position of closing the housing 5 by ratchet mechanisms which are known in themselves, and which can be located at the level of the lower edge of the front wall 6a of the lid 6 and of an edge 5d of the housing 5 on which rests the lower edge of the front wall 6a, which comprises a substantially semicircular cutout 6b, covering the ~~base 3~~ sleeve-shaped catheter base 31 in the closed position of the lid.

Replace the paragraph beginning at page 13, line 27 with:

The placement of the device of Figures 8-11 is carried out by first fixing the housing 5 to the anatomical area of the patient by the base 7, whose internal face is provided with a colloid which comprises antimicrobial or antiseptic substances, the chamber 8 being arranged vertically with respect to the chamber which was implanted earlier under the skin of the patient. Then, the operator pushes the ~~base 3~~ sleeve-shaped catheter base 31 of the needle 1 into the chamber 9 by embedding through elastically deformable catches 9c, until the ~~base 3~~ sleeve-shaped catheter base 31 is applied on the bottom of the chamber 9, where it is retained by the catches 9c which rest on the ~~base 3~~ sleeve-shaped catheter base 31. At the same time, the vertical part of the Huber needle 1 is automatically implanted by its lower end into the chamber which was implanted through the skin of the patient. After the chemotherapy products have been administered to the patient, the retraction of the needle 1 is carried out by pulling the needle 1 upward and its ~~base 3~~ sleeve-shaped catheter base 31 against the elastic return force of the catches 9c.

Replace the paragraph beginning at page 14, line 11 with:

The device of Figures 8-11 can be used with a Huber needle 1 whose ~~base 3~~ sleeve-shaped catheter base 31 is connected to the external tube 4 which is forced on the truncated free end of the ~~base 3~~ sleeve-shaped catheter base 31, forming an external pad 4a as represented in Figures 12 and 13. In this case, the part of connection with pad 4a is embedded in the groove 9d so that the truncated end part of the ~~base 3~~ sleeve-shaped catheter base 31 is held at the bottom of the chamber 9 with two of the catches 9c covering the upper face of the ~~base 3~~ sleeve-shaped catheter base 31 and the connection tube is just covered by the two other catches 9c immediately before exiting from the housing 5. Thus, the end part of the ~~base 3~~ sleeve-shaped catheter base 31 does not project from the housing 5, since it is accommodated in a part of the chamber 9 which opens towards the chamber 8, and the remaining part of the ~~base 3~~ catheter base sleeve 31 projects into the chamber 8 with the vertical part of the Huber needle 1 being located in proximity to the corresponding lateral face of the chamber 8, as can be seen in Figure 13. Naturally, the truncated end part of the ~~base 3~~ catheter base sleeve 31 has dimensions such that it is received in the part which has the same shape as the opening from chamber 9 into chamber 8. As far as the rest is concerned, the placement and the retraction of the Huber needle is carried out in the same manner as in Figures 8-11.